Notice of Request for Drain Improvement Drainage Act, R.S.O. 1990,c. D.17, subs. 78(1)

To:	The Council of the Corporation of the Municipality of West Elgin			
Re:	Krause Drain			
	(Name of Drain)			
	cordance with section 78(1) of the <i>Drainage Act</i> , take notice that I/we, as owner(s) of land affected, request that the above tioned drain be improved.			
The	work being requested is (check all appropriate boxes):			
[Changing the course of the drainage works;			
[☐ Making a new outlet for the whole or any part of the drainage works;			
Constructing a tile drain under the bed of the whole or any part of the drainage works;				
Constructing, reconstructing or extending bridges or culverts;				
Constructing, reconstructing or extending embankments, walls, dykes, dams, reservoirs, pumping stations or other protective works in connection with the drainage works;				
[Otherwise improving, extending to an outlet or altering the drainage works;			
Covering all or part of the drainage works; and/or				
	Consolidating two or more drainage works.			
Provide a more specific description of the proposed drain improvement you are requesting: Closing a portion of clrain that cuts off				
	a corner of a farm tield			
Prop	perty Owners:			
	ur municipal property tax bill will provide the property description and parcel roll number. rural areas, the property description should be in the form of (part) lot and concession and civic address.			
• In	urban areas, the property description should be in the form of street address and lot and plan number, if available.			
	d or Geographic Township Parcel Roll Number			
vval	Ald borough 040-00800			
	pperty is owned in partnership, all partners must be listed. If property is owned by a corporation, list the corporation's name and the name corporate position of the authorized officer. Only the owner(s) of the property may request a drain improvement.			

Sole Ownership

Individual or Sole Ownership		
me (Last Name, First Name)	Signature	Date (yyyy/mm/dd)
Sacher, August	# Lache	2021.05.2
Enter the mailing address and primary contact information of property of	wner below:	
Last Name SQ CVP	First Name	Middle Initial
Mailing Address Unit Number Street/Road Number Street/Road Name Street/Road Name		РО Вох
Rodney	Province \(\times_{\sqrt{\chi}} \times_{\shrt{\chi}} \.	Postal Code NUL 200
Telephone Number / Cell Phone Number (Optional)	Email Address (Optional)	
To be completed by recipient municipality:		
Notice filed this 1 day of June 20 21		
Name of Clerk (Last Name, First Name)	Signature of Clerk	
Nethercott, Jana	Jana/atrucce	

